										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997											906365				
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAL TYPI	L ENTITY	OR	OTHER SMALL			
FOR		NL	NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE		
BASIC FEE										395.00	OR		790.00		
TOTAL CLAIMS			23 minus 20 =			3			x\$11=		OR	x\$22=	66		
INDEPENDENT CLAIMS			minus 3 =			• 4			x41=		OR	x82=	328		
MULTIPLE DEPENDENT CLAIM PRESENT							.	+135=		OR	+270=				
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL		OR	TOTAL	1184		
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR	OTHER THAN SMALL ENTITY			
ent ▲ ⊅		CLAIM REMAINI AFTEF AMENDM	ING R		PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
IDM	Total	. 18		Minus	**	23	= 0		x\$11=		OR	x\$22=			
AMENDMENT	Independent	* 1		Minus	***	7	= 🔯		x41=		OR	x82=			
4	FIRST PRES	SENTATIO	N OF I	MULTIPLE	DEPE	NDENT CL	AIM		+135=		OR	+270=			
	(Column 1) (Column 2) (Column 3)							,	TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE	·		
AMENDMENT .		CLAIM REMAINI AFTEI AMENDM	ING R		PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*		Minus	**	23	=		x\$11=	:	OR	x\$22=			
	Independent	*		Minus	***	7	=		x41=		OR	x82=			
٨	FIRST PRE	SENTATIO	N.OF	MULTIPLE	DEPE	ENDENT CL	AIM		+135=		OR	+270=			
(Column 1) (Column 2) (Column 3)								_ ,	TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE			
ENT OT		CLAIM REMAIN AFTE AMENDM	ING R		PRI	IGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
OM M	Total	*		Minus	**		=		x\$11=	:	OR	x\$22=			
AMENDMENT	Independent	*		Minus	***		=		x41=		OR	x82=			
∠	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	=	OR	+270=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."															
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															



UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office ASSISTANT SECRETARY OF COMMERCE AND COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

NOTICE OF FILING/CLAIM FEE(S) DUE TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

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APPLICATION	NUMBER:	08/	190636	5						
Total Fee Calculation										
	Fee Code	Total # Claims	Number Extra	_X	Fee	Fee =	Total			
ì	Sm./Lg.				Sm. Entity	Lg. Entity	Total			
Basic Filing Fee	201/101					unb	Mish			
Total Claims >20	203/103	23 -20	= 3	x		23	<u> 114</u>			
Independent Claims >3	202/102	<u>23</u> -20	= 4	х		818	<u> </u>			
Mult. Dep Claim Present	204/104	_				. 29	<u></u>			
Surcharge	205/105					1398	inst			
English Translation	139					<u> </u>	<u> 134</u>			
TOTAL FEE CALCUL	ATION									
					,	<u> </u>	1286			
Fees due upon filing ti	he application:					÷				
Total Filing Fees Due	=\$	1360								
Less Filing Fees Subm	itted -\$			<u>.</u>						
BALANCE DUE	= \$	1286				•				

FORM OIPE-RAM-01 (Rev. 5/97)

Office of Initial Patent Examination